PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

09 768174

,		CLAIMS A	S FILED	- PART	ł			SMALL	ENTITY		OTHE	RTHAN
r_			(Colum	nn 1)	(Col	umn 2)	ī	TYPE		OF		ENTITY
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E \$375	OF	BASIC FE	\$750
TOTAL CHARGEABLE CLAIMS			m	minus 20= *		:		X\$ 9=		OF	X\$18=	
INDEPENDENT CLAIMS			n	minus 3 = *		*		X42=			X84=	<u> </u>
M	JLTIPLE DEPE	NDENT CLAIM F	PRESENT	1				+140=	1	OR		Ì
t į	f the differenc	e in column 1 is	s lesis than z	ss than zero, enter "0" in column 2				TOTAL		OR	L	
	(ON OMIA IS	VWENDE	MENDED - PART II				TOTAL	L			TIESN
		(Column 1)	HWENDL	(Colun	nn 2)	(Column 3)	-	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAI FEE
	Total	. 6	Minus	**	Ô.	=		X\$ 9=		OR	X\$18=	
	Independent	TENTATION OF M	Miņus	DENDENT	CL AIM	<u> </u>		X42=		OR	X84=	
	FINOI PHESI	ENTATION OF M	OLTIPLE DE	PENDENT	CLAIM			+140=		OR	+280=	
							L	TOTAL	 	- OR	TOTAL	<u> </u>
		(Calumn 1)		(Calum	.n. 0)	(Column 2)	А	DDIT. FEE		1	ADDIT. FEE	·
_		(Column 1) CLAIMS		(Colum HIGHE	ST	(Column 3)	Г		ADDI-	7 1		4 DDI
AMENDMEN B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		='·	 	X42=		1 1	X84=	
ָ	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDENT (CLAIM		-	72-		OR	7,0 1	
	· · · · · · · · · · · · · · · · · · ·	,	,					+140=		OR	+280≃	
							ΑI	TOTAL ODIT, FEE		OR ,	TOTAL ADDIT, FEE	
		(Column 1)		(Colum	n 2)	(Column 3)						
-		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ST ER JSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus -	***		=	-	X42=			X84=	<u> </u>
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT (CLAIM		-	<u> </u>		OR	AU4=	
								+140=		OR	+280=	
* If	the "Highest Nur	nn 1 is less than th nber Previously Pa	id For" IN THIS	SPACE is le	ess than	20, enter "20."	ΑD	TOTAL DIT: FEE		OR A	TOTAL DDIT. FEE	
		nber Previously Pa her Previously Paid						_	ronciate hov			